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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re application of: Smith et al.

Attorney Docket No.: VISAP076

Application No.: 10/633,020

Examiner: COLAN, Giovanna B.

Filed: July 31, 2003

Group: 2162

Title: SMART CARD PERSONALIZATION  
ASSISTANCE TOOL

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### CERTIFICATE OF EFS-WEB TRANSMISSION

I hereby certify that this correspondence is being transmitted electronically through EFS-WEB to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450 on June 27, 2007.

Signed: Ann Lowe Type Signature Here /Ann Lowe/

### AMENDMENT TRANSMITTAL

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application. The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	20	MINUS	35	0	x 25 =	x 50 =
Independent Claims	2	MINUS	4	0	x 100 =	x 200 =
Multiple Dependent Claim Present and Fee Not Previously Paid						
Total					\$0	\$

- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.
- ☐ Enclosed is our Check No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. VISAP076).

Respectfully submitted,  
BEYER WEAVER LLP  
/Rupak Nag/

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Reg. No. 37,493

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